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To: Examiner Philip Robert Smith Art Unit: 3739	From: Thomas Spinelli, Esq. Registration No.: 39,533
Fax: 571-273-8300	Pages: 25
Phone: 571-272-6087	Date: July 24, 2006
Re: USSN: 10/790,327 Our Docket: 17505	CC:

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Acknowledge

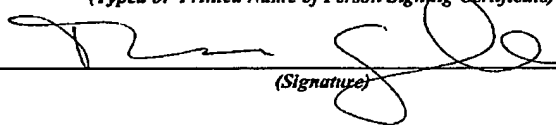
The following is being filed with the U.S. Patent and Trademark Office via facsimile on July 24, 2006:

1. Amendment and Response Under 37 C.F.R. § 1.116
2. Transmittal in Duplicate
3. Certificate of Facsimile Transmission

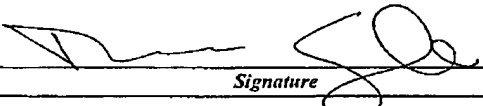
Applicants: Masatoshi Homan, et al.
Serial No.: 10/790,327
For: ENDOSCOPE IMAGE PICK-UP APPARATUS
Filed: March 1, 2004
Docket: 17505
Dated: July 24, 2006
TS:cm

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Masatoshi Homan, et al.			Docket No. 17505
Application No. 10/790,327	Filing Date March 1, 2004	Examiner Philip Robert Smith	Group Art Unit 3739
Invention: ENDOSCOPE IMAGE PICK-UP APPARATUS			RECEIVED CENTRAL FAX CENTER JUL 24 2006
Confirmation No.: 3739			
<p>I hereby certify that this <u>AMENDMENT AND RESPONSE UNDER 37 C.F.R. 1.116</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>) on <u>July 24, 2006</u> (Date)</p> <p style="text-align: center;"><u>Thomas Spinelli</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

P1B/REV02

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17505	
Applicant(s): Masatoshi Homan, et al.						
Application No. 10/790,327	Filing Date March 1, 2004	Examiner Philip Robert Smith	Customer No. 23389	Group Art Unit 3739	Confirmation No. 2711	
Invention: ENDOSCOPE IMAGE PICK-UP APPARATUS						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	33 -	33 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	6 -	6 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<div style="display: flex; flex-direction: row;"><div style="flex: 1;"><p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p><p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p><p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p><p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP</p><p style="margin-left: 20px;"><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p><p style="margin-left: 20px;"><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p><p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p><p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p></div><div style="flex: 1; text-align: right; padding-top: 20px;"><p>Dated: July 24, 2006</p></div></div>						
<div style="text-align: center;"> Signature</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Thomas Spinelli Registration No.: 39,533</div>			<div style="border: 1px solid black; padding: 5px; margin-top: 10px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" (37 CFR 1.8(a)) on _____</p><p style="text-align: center;">(Date)</p><p style="text-align: center;">_____ Signature of Person Mailing Correspondence</p><p style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</p></div>			
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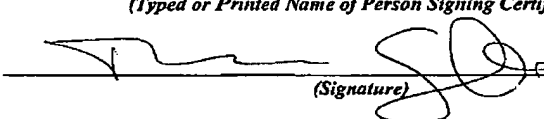
P11LARGE/REV09

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Masatoshi Homan, et al.		Docket No. 17505	
Application No. 10/790,327	Filing Date March 1, 2004	Examiner Philip Robert Smith	Group Art Unit 3739

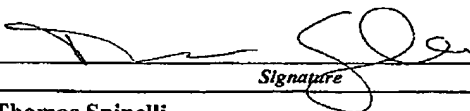
Invention: **ENDOSCOPE IMAGE PICK-UP APPARATUS**

Confirmation No.: **3739**

I hereby certify that this AMENDMENT AND RESPONSE UNDER 37 C.F.R. 1.116
(Identify type of correspondence)
 is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300)
 on July 24, 2006
(Date)

Thomas Spinelli
(Typed or Printed Name of Person Signing Certificate)

(Signature)

Note: Each paper must have its own certificate of mailing.

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17505	
Applicant(s): Masatoshi Homan, et al.						
Application No. 10/790,327	Filing Date March 1, 2004	Examiner Philip Robert Smith	Customer No. 23389	Group Art Unit 3739	Confirmation No. 2711	
Invention: ENDOSCOPE IMAGE PICK-UP APPARATUS						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	33 -	33 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	6 -	6 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: July 24, 2006			
Thomas Spinelli Registration No.: 39,533			<div style="border: 1px solid black; padding: 5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)</p><p>_____ Signature of Person Mailing Correspondence</p><p>_____ Typed or Printed Name of Person Mailing Correspondence</p></div>			
CC:						

P11LARGE/REV09

RESPONSE UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 3711PATENT APPLICATION
Do. No. 2916-3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Steve Corbin et al.

Serial No. 10/753,836

Examiner: Mark S. Graham

Confirmation No.: 6794

Filed: January 5, 2004

Group Art Unit: 3711

For: YARD GAME OBSTACLE SYSTEM

Date: July 24, 2006

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Responsive to the Final Office Action dated June 9, 2006, enclosed is an amendment in the above-identified application.

The fee has been calculated as shown below.

CLAIMS AS AMENDED					
For:	Number After Amendment	Previous Number	Extra	Rate	Additional Fee
Total Claims	11	-29*	0	x \$50 =	\$0
Independent Claims	6	-6**	0	x \$200 =	\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

*greater of twenty (20) or number for which fee has been paid

**greater of three (3) or number for which fee has been paid

☒ Any deficiency or overpayment should be charged or credited to deposit account number 13-1703.

Customer No. 20575

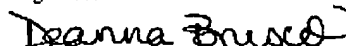
Respectfully submitted,

MARGER JOHNSON & McCOLLOM, P.C.

Bryan D. Kirkpatrick
Reg. No. 53,135MARGER JOHNSON & McCOLLOM, P.C.
210 SW Morrison Street, Suite 400
Portland, OR 97204
(503) 222-3613

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Signature


Deanna Brusco

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RESPONSE UNDER 37 C.F.R. §1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 3739

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	Masatoshi Homan, et al.	Examiner:	Philip Robert Smith
Serial No.:	10/790,327	Art Unit:	3739
Filed:	March 1, 2004	Docket:	17505
For:	ENDOSCOPE IMAGE PICK-UP APPARATUS	Dated:	July 24, 2006
Conf. No.:	2711		

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA. 22313-1450

AMENDMENT AND RESPONSE UNDER 37 C.F.R. §1.116

Sir:

In response to an Office Action of the U.S. Patent and Trademark Office mailed on April 24, 2006, please amend the subject application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 16 of this paper.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office on the date set forth below.

Dated: July 24, 2006


Thomas Spinelli

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